

JUN/08/2010/TUE 10:31 AM

FAX No.

P. 001

THE WEBB LAW FIRM.
Patent | Trademark | Copyright Law

RECEIVED
CENTRAL FAX CENTER

JUN 08 2010

700 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219

P 412.471.8815
F 412.471.4094
webblaw@webblaw.com

FACSIMILE TRANSMITTAL

Name of Individual	Examiner Gregory A. Willson
Company	United States Patent and Trademark Office Art Unit 3749
City and State	Alexandria, VA
Facsimile Number	571-273-8300
From	William H. Logsdon
Total Number of Pages	53 (including information sheet)
Date Transmitted	June 8, 2010
Webb Ref. Your Ref	0470-053863 U.S. Patent App. No. 10/561,834 Niels Alexander ROZENDAAL

10/561534 T.W.

URGENT

PLEASE DELIVER ASAP!!!

If you do not receive all pages, please call 412.471.8815 as soon as possible.

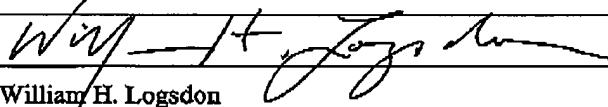
JUN 08 2010

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/561,534	
	Filing Date	6/18/2004	
	First Named Inventor	Niels Alexander Rozendaal	
	Art Unit	3749	
	Examiner Name	Gregory A. Wilson	
Total Number of Pages in This Submission		Attorney Docket Number	0470 - 053863

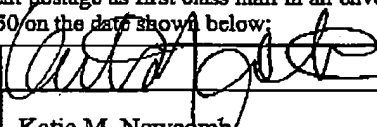
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input checked="" type="checkbox"/> After Allowance communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Copy of Return Receipt Postcard -Copy of IDS as filed 09/07/07
<div style="border: 1px solid black; padding: 2px;">Remarks</div>		

The Commissioner for Patents is hereby authorized to charge any additional fees or underpayment of fees under 37 CFR 1.16 and 1.17 to Deposit Account No. 23-0650.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	The Webb Law Firm		
Signature			
Printed Name	William H. Logsdon		
Date	June 8, 2010	Reg. No.	22,132

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Katie M. Newcomb	Date	June 8, 2010